

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



January 25, 1994

ALL COUNTY LETTER NO. 94-07

TO: ALL-COUNTY WELFARE DIRECTORS

REASONS FOR THIS TRANSMITTAL

- ☐ State Law Change
- ☐ Federal Law or Regulation Change
- ☐ Court Order or Settlement Agreement
- ☒ Clarification Requested by One or More Counties
- ☒ Initiated by CDSS

SUBJECT: PERSONAL CARE SERVICES PROGRAM (PCSP)

REFERENCE: ACL #93-67 [Issued 9/10/93]

This letter is to reiterate and clarify one aspect of the interrelationship between PCSP and the Residual program. Counties recently posed the following questions and received the following answers:

Q. "If a recipient has cooperated fully but the doctor fails to complete the necessary documentation, despite County staff intervention, the recipient will be aided on IHSS Residual pending receipt of the SOC 425 from the doctor?"

A. This is incorrect. Welfare and Institutions Code section 12300, subdivision (f), as amended by Senate Bill 35, in June of 1993, states that a recipient who is eligible for a personal care service provided through PCSP is not eligible for the same service under IHSS. Senate Bill 1078, effective January 1, 1994, further amended this language to make clear that this prohibition to dual eligibility applied to PCSP ancillary services also. "Eligibility" for the IHSS program refers to determination of linkage, income, resources, etc., as set forth in Manual of Policy and Procedures section 30-755. All County Letter 93-67 lists the eligibility conditions for PCSP:

- Applicant receives a categorical cash payment.
- Applicant suffers from a disability expected to last 12 months or longer or end in death.
- Applicant needs at least one personal care service or paramedical service.
- Applicant is not a minor employing his/her parent(s) to provide IHSS.
- Applicant is not receiving services from his/her spouse.

- Applicant is not receiving Advance Payment for services.

An applicant who meets these criteria is eligible for PCSP and is not eligible for the Residual program (except to the extent the person needs a service not within the scope of PCSP services, but available through the Residual program, i.e., protective supervision). Page three of the same All County Letter (93-67) specifically addresses this issue under paragraph "V. Physician Cooperation." As stated there, "...if the physician continues his/her refusal the recipient will be unable to receive services." (Emphasis added.)

It should be remembered that there is no requirement that a recipient secure a certification from his or her personal physician. The only requirement is that a certification be secured from a **physician**. The referenced paragraph in All County Letter 93-67 discusses steps the county can take to assist the recipient in securing a physician's certification.

In conclusion, if an applicant/recipient is truly cooperating and the county has provided the assistance referred to above, any recipient who actually needs PCSP will be able to secure the necessary physician certification within a reasonable time. For new cases, IHSS will not be available until the applicant produces this documentation, as well as satisfying other aspects of the eligibility determination and need assessment process.

While funding for IHSS is not available before the application process has been completed, retroactive reimbursement is available for services subsequently authorized and actually delivered by a qualified provider on or after the date of application.

Q. "Recipients who cannot understand their responsibility in the PCSP process and have been referred to Adult Protective Services for a possible referral to the Public Guardian will continue to be aided on IHSS Residual until the problem is solved."

A. This also is incorrect. The eligibility analysis set forth in the proceeding answer applies in this case also. The applicant's inability to understand his or her responsibility for the PCSP application process is not a factor which establishes eligibility for the Residual program. If an applicant is eligible for PCSP, he or she is not eligible for PCSP covered services through the Residual program.

If the recipient is incompetent, the county will have to secure an authorized representative who can act on behalf of the

recipient, and provide any additional assistance necessary to complete the application process.

Q. Can a physician sign an SOC 425 on the basis of an examination of the patient and a report by a public health nurse?

A. Yes. A physician may sign an SOC 425 certifying the need for Medi-Cal funded Personal Care services on the basis of an examination of the patient and report by a Public Health nurse. In preparing this response, we consulted both the California Department of Health Services and the staff counsel of the California Medical Board.

In summary, provided that the applicant/recipient meets the PCSP eligibility criteria listed above, the applicant/recipient **is not eligible** to receive services through the Residual Program which are authorizable through the PCSP program, whether delivered before or after the application process has been completed and PCSP authorized.

In view of the lengthy period since implementation of PCSP, we recommend that counties review all cases which satisfy the PCSP eligibility criteria listed above, and which have not yet been converted to PCSP, and complete the conversion process or terminate services. We recommend that counties complete this review and issue the resulting notices of action no later than February 15, 1994.

If you have any questions on this, please direct your calls to Mr. Robert Holcomb of the Adult Services Policy Bureau at (916) 657-2159.



GORDON SCOTT
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c: CWDA